

DO/ EO WORKSHEET

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| <input type="checkbox"/> Article 19 Amendments | <input type="checkbox"/> Request form PCT/RO/101 |
| <input type="checkbox"/> PCT/IPEA/409 IPER : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU
<input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____ | <input type="checkbox"/> PCT/ISA/210 - Search Report : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU
<input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____ <input type="checkbox"/> NONE |
| <input type="checkbox"/> Annexes to 409 | <input type="checkbox"/> Search Report References |
| <input checked="" type="checkbox"/> PCT/ISA/237 : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU
<input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____ | <input type="checkbox"/> N/A |
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RECEIPTS FROM THE APPLICANT (other than checked above) :

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Basic National Fee (or authorization to charge) | <input checked="" type="checkbox"/> Preliminary Amendment(s) Filed on :
1. <input type="checkbox"/> same as 371 request date 2. _____ 3. _____ |
| <input checked="" type="checkbox"/> Description <input checked="" type="checkbox"/> Claims <input type="checkbox"/> Abstract | <input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on :
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| <input type="checkbox"/> Translation of Article 19 Amendments
<input type="checkbox"/> entered <input type="checkbox"/> not entered :
<input type="checkbox"/> not a page for page substitution
<input type="checkbox"/> replaced by Article 34 Amendment | <input type="checkbox"/> Assignee Statement Under 37 CFR 3.73(b) |
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| <input type="checkbox"/> Power of Attorney | <input type="checkbox"/> Verified Small Status Statement |
| <input type="checkbox"/> Change of Address | <input checked="" type="checkbox"/> Oath/ Declaration (executed) |
| | <input type="checkbox"/> Oath/ Declaration <input type="checkbox"/> unsigned <input type="checkbox"/> no citizenship <input type="checkbox"/> other |
| | <input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing |
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28 Mar 06

Date Acceptable Oath/ Declaration Received

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Date of Completion of DO/ EO 905 - Notification of Missing Requirements

Date of Completion of DO/ EO 909 - Notification of Abandonment

Date of Completion of DO/ EO 916 - Notification of Defective Response

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